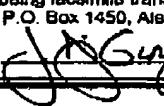


JUN 01 2005

AMENDMENT TRANSMITTAL LETTER				Docket No. MXI-211
Application No. 10/073644-Conf. #6293	Filing Date February 11, 2002	Examiner M. A. Belyavskyi	Art Unit 1644	
Applicant(s): Debra HUDSON et al.				
Invention: HUMAN MONOCLONAL ANTIBODIES TO FC ALPHA RECEPTOR (CD89)				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
Total Claims	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
30	- 20 =		x	
Independent Claims	6	- 3 =	x	
Multiple Dependent Claims (check if applicable) <input checked="" type="checkbox"/>				360.00
Other fee (please specify): Notice of appeal				500.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				860.00
<input checked="" type="checkbox"/> Large Entity		<input type="checkbox"/> Small Entity		
<input type="checkbox"/> No additional fee is required for this amendment.				
<input checked="" type="checkbox"/> Please charge Deposit Account No. 12-0080 in the amount of \$ 860.00. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 12-0080 as described below.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
_____ Jeanne M. DiGiorgio Attorney Reg. No.: 41710				
Dated: June 1, 2005				
<p>I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9906 at MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.</p> <p>Dated: June 1, 2005 Signature:  (Jeanne M. DiGiorgio)</p>				

PTO/SB/87 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

U. S. Patent and Trademark Office, U. S. DEPARTMENT OF COMMERCE

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Application No. (if known): 10/073644

Attorney Docket No.: MXI-211

Certificate of Transmission under 37 CFR 1.8

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on June 1, 2005
Date



Signature

Jeanne M. DiGiorgio

Typed or printed name of person signing Certificate

41,710 (617) 227-7400
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Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)
Notice of Appeal (1 page)
Amendment After Final Action (37 C.F.R. Section 1.116) (4 pages)
Amendment Transmittal (1 page)
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DATE: June 1, 2005

PTO IDENTIFIER: Application Number 10/073644-Conf. #6293
Patent Number

Inventor: Debra HUDSON et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (703) 872-9306

FROM: LAHIVE & COCKFIELD, LLP

Jill R. Gorny

PHONE: (617) 227-7400

Attorney Dkt. #: MXI-211

PAGES (including Cover Sheet): 14

CONTENTS: Fee Transmittal (1 page, in duplicate)
Notice of Appeal (1 page)
Amendment After Final Action (37 C.F.R. Section 1.116) (8 pages)
Amendment Transmittal (1 page)
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PTO/SB/17 (12-04v2)

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Effective on 12/09/2004.		Complete if Known	
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number	10/073644-Conf. #8293
FEE TRANSMITTAL		Filing Date	February 11, 2002
For FY 2005		First Named Inventor	Debra HUDSON
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	M. A. Belyavskyi
TOTAL AMOUNT OF PAYMENT (\$)		Art Unit	1644
(\$)		Attorney Docket No.	MXI-211

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number 12-0080 Deposit Account Name Lahive & Cockfield, LLP				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 =	x	=				
- 3 =	x	=				

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge), 1401 Notice of appeal

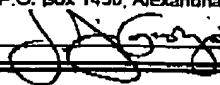
500.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	41,710	Telephone	(617) 227-7400
Name (Print/Type)	Jeanne M. DiGiorgio			Date	June 1, 2005

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Dated: June 1, 2005

Signature, 

(Jeanne M. DiGiorgio)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) MXI-211
In re Application of Debra HUDSON et al.		
Application Number 10/073844-Conf. #6293		Filed February 11, 2002
For HUMAN MONOCLOINAL ANTIBODIES TO FC ALPHA RECEPTOR (CD89)		
Art Unit 1644	Examiner M. A. Belyavskyi	

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))

\$ 500.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is \$ _____

A check in the amount of the fee is enclosed.

Payment by credit card Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 12-0080 I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

I am the

applicant/inventor.

assignee of record of the entire interest
See 37 CFR 3.71. Statement under 37 CFR 3.73(b)
is enclosed. (Form PTO/SB/96)

attorney or agent of record
Registration number 41.710

attorney or agent acting under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____


 Signature
 Jeanne M. DiGiorgio

Typed or printed name

(617) 227-7400

Telephone number

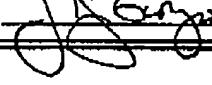
June 1, 2005

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below. *Total of 1 forms are submitted.

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Dated: June 1, 2005

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PAGE 4/14 * RCVD AT 6/1/2005 5:51:01 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/4 * DNIS:8729306 * CSID: * DURATION (mm:ss):03:58

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